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PTO/SB/31 (09-06)  
Approved for use through 03/31/2007. OMB 0651-0031  
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|--|-----------------------------|---|
| NOTICE OF APPEAL FROM THE EXAMINER TO<br>THE BOARD OF PATENT APPEALS AND INTERFERENCES |                             | Docket Number (Optional)<br>023372.0110C1US |
| In re Application of<br>Hayim Lindenbaum et al.  |                             |   |
| Application Number<br>10/616,887-Conf. #1672   |                             | Filed<br>July 10, 2003                      |
| For METHODS AND APPARATUS FOR HEMOSTATIS FOLLOWING<br>ARTERIAL CATHETERIZATION         |                             |   |
| Art Unit<br>3739   | Examiner<br>P. J. Vrettakos |   |

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ 500.00

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ 250.00

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-2228. I have enclosed a duplicate copy of this sheet.

A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

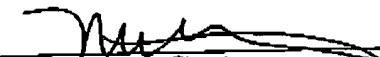
I am the

applicant/inventor.

assignee of record of the entire interest.  
See 37 CFR 3.71. Statement under 37 CFR 3.73(b)  
is enclosed. (Form PTO/SB/96)

attorney or agent of record.  
Registration number 37,028

attorney or agent acting under 37 CFR 1.34.  
Registration number if acting under 37 CFR 1.34.



Signature

Michele V. Frank  
Typed or printed name

(703) 744-8000

Telephone number

November 20, 2006

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.  
Submit multiple forms if more than one signature is required, see below.

\*Total of 1 forms are submitted.

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